THE MINISTER OF STATE IN THE MINISTRY OF PERSONNEL, PUBLIC GRIEVANCES AND PENSIONS AND THE MINISTER OF STATE IN THE MINISTRY OF HOME AFFAIRS (SHRI P. CHIDAMBARAM); (a) In the Cen tral Serivces following the general principles of senicri y, the seniority of direct recuits and promotees is determined according to the rotation of vacancies as per the quotas laid down for each mode or recruitment.

(b) Revised instructions on Seniority regarding the operation of the System of kotation of vacancies were issued by Department of Personnel and Training vide O.M.NO. 35014/2|80—Estt. (D) f dated the 7th February, 1986. A copy of this O.M is enclosed [See Appendix CXL-VIII Annexure No. 131]

(c) and (d) In Some cases in which the quota and rota rule had failed, the Supreme Court, some High Courts and Central Administrative Tribunals have given direction and fixation of seniority depending on the merits of each cases. The details of all such cases are not cen-trall available. Depending on the Circumstances of each oases, Ministries/Depart-iments concerned have taken necessary action either to implement the judgements or to file review petitions or appeals.

(e) The revised instruction on seniority issued on 7.2.86 are considered adequate to ensure proper fixation of Seniority.

Report of Lentin Commission

3167. SHRI CHITTA BASU:

DR. (SHRIMATI) SAROIINI MAHISHI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state what steps the Central Government have taken to ensure the quality of drugs coming from Maharashtra, because of laxity of Drug Control in that State as revealed in the Lentin Commission report?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROI KHAPAR-DE): Based on the recommendation of the Lentin Commission, the Drugs Controller, India has written to Commission, FDA, Maharashtra to take the following action immediately.

(a) Strengthening of the State drug control machinery in Maharashtra.

(b) Stringent enforcement of the Drugs and Cosmetics Act and rules thereunder.

(c) Setting up of full-fledged testing in hospitals located in Maharashtra.

(d) Appointment of full time qualified Drug Controller in Maharashtra.

(e) Rigid inspection of manufacturing firms and approved laboratories prior to their licensing.

(f) Appropriate action to be taken against firms manufacturing sub-standard drugs in Maharashtra.

(g) Proper procedures of procurement, storage, distribution and recall of drugs in hospitals located in Maharashtra.

The Union Minister of Health and Family Welfare has also written to Chief Ministers of all the States/UT_S drawing their attention to the various recommenda-ions made by the Lentin Commission and emphasizing the importance of implementing the quality control measures and testing procedures of drugs and pharmaceuticals as laid down in the Drugs and Cosmetics Act.

WHO (consultant) drugs report on drugs conference

3168. CHOWDHARY RAM SEWAK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state;

(a) whether it is a fact that the WHO (Consultant) Drugs in his report has re commended the revival of Drugs Confer ence;

(b) whether any action in the matter has been taken by Government; and

(c) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROI KHAPARDE): (a) Yes, Sir.

(b) and (c) The recommendation made by the consultant is under consideration.

Drug Policy

3169. SHRI RAOOF VALIULLAH:
DR. (SHRIMATI) SAROJ INI MAHJSHI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Starred Question 423 given in the Rajya Sabha on the 31st August 1988 and state:

(a) whether his Ministry was associated with the finalisation of the drug policy relating to the criteria for identification of drugs under National Health Programme;

(b) whether it is a fact that the measures which were announced by the Department of Chemicals and Pelrochemicals contain the decisions of Government on Drug Policy;

(c) whether it is a fact that measures provide that all the drugs required for National Health Prcgramme would front, Category-!.

(d) what are the reasons for his Ministry not to have followed the measures; and

(e) what are the full contents of the letter of 26th May, 1987 referred to by him?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMAR! SAROJ KHAPARDE); (a) The Ministry of Health was consulted at the time of preparation of the new drug policy by the Department of Chemicals and Petrochemicals in their criteria for identification of drugs under National Health Programmes was set by the Department of Chemicals finally.

(b) Yes, Sir.

(c) The Measures for Rationalisation, Quality Control and Growth of Drugs and Pharmaceutical Industry in. India provide that "Category I would consist of drugs required for the National Health Programmes", It doss not specify that all "all" the drugs required for the National Health Programmes would form Category I.

(d) and (e) As advised by Department of Chemicals and Petrochemicals, drugs used for the 11 identified National Health Programmes, were recommended for categorisation. The Department of Chemicals and Petrochemicals in their letter dated 26-5-87 had suggested that a list of drugs actually used at present in significant quantities under the National Health Programmes should be sent to them. Also as and when new drugs are introduced these can be added to Category I.

Drugs under National Health Programmes

3170. SHRI RAOOF VALIULLAH:
DR. (SHRIMATI) SAROJINI MAHISHI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Unstarred Question 535 given in the Rajya Sabha on the 15th(November, 1988 and state:

(a) whether it is a fact that Govern ment have finalised 14 National Health Programmes;

(b) whe'her it is a also a fact that his Ministry drew up the list of drugs for fourteen Health Programmes and sent to Ministry of Indus'ry for inclusion under price control;

(c) on what basis the list erf 11 programmes have been provided to expect committee:

(d) what are the names of programmes which have not been provided; and

(2) what is the budget allocated to each of these programmes during 1987-88 and 1988-89

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE); (a) to (c) No, Sir. Although a list of drugs required for 14 Health Programmes was drawn, and referred to the De-